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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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0010/PTO  
Rev. 6/95

U.S. Department of Commerce  
Patent and Trademark Office

**DECLARATION FOR  
UTILITY OR DESIGN  
PATENT APPLICATION**

Declaration Submitted with Initial Filing      OR     Declaration Submitted after Initial Filing

Attorney Docket Number	H 3763 PCT/US
First Named Inventor	KROPF, Christian
COMPLETE IF KNOWN	
Application Number	
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.  
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**FINE SUSPENSIONS OF POORLY SOLUBLE CALCIUM SALTS AND THEIR USE IN DENTAL CARE PRODUCTS**

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY)  as United States Application Number or PCT International

Application Number  and was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
198 58 662.0	Germany	12/18/1998	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.
		<input type="checkbox"/>

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

AUG 15 2001

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Application Number PCT/EP99/09683 and was amended on (MM/DD/YYYY) \_\_\_\_\_ (if applicable).

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U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
	PCT/EP99/09683	12/09/1999	

Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

<input type="checkbox"/> Firm Name _____	<input type="checkbox"/> Customer Number _____ or label _____
OR	
<input checked="" type="checkbox"/> List Attorney(s) and/or agent(s) name and registration number below:	
Name _____	Registration Number _____
Wayne C. Jaeschke Kimberly R. Hild	21,062 39,224
	Glenn E. J. Murphy Stephen D. Harper
	33,539 33,243

Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to:	<input checked="" type="checkbox"/> Customer Number _____ or label <b>00423</b>	OR <input type="checkbox"/> Fill in correspondence address below
Name <u>Glenn E. J. Murphy</u>		
Address <u>Henkel Corporation - Patent Department</u>		
Address <u>2500 Renaissance Boulevard, Suite 200</u>		
City <u>Gulph Mills</u>	State <u>PA</u>	ZIP <u>19406</u>
Country <u>USA</u>	Telephone <u>610-278-4926</u>	Fax <u>610-278-6548</u>

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this						
Given Name	<b>Christian</b>	Middle Initial		Family Name	<b>KROPP</b>		Suffix e.g. Jr.	
Inventor's Signature					Date			
Residence: City	<b>Duesseldorf</b>	State		Country	<b>Germany</b>	Citizenship	<b>Germany</b>	
Post Office Address	<b>Caeciliengasse 4</b>							
Post Office Address								
City	<b>40597 Duesseldorf</b>	State		Zip		Country	<b>Germany</b>	Applicant Authority
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto								

**DECLARATION****ADDITIONAL INVENTOR(S)**  
Supplemental Sheet

Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor

Given Name	Ulrik	Middle Initial		Family Name	BRUENINGHAUS	Suffix e.g. Jr.	
------------	-------	----------------	--	-------------	--------------	-----------------	--

Inventor's Signature					Date		
----------------------	--	--	--	--	------	--	--

Residence: City	Monheim	State		Country	Germany	Citizenship	Germany
-----------------	---------	-------	--	---------	---------	-------------	---------

Post Office Address	An der Dorfstr. 6						
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Post Office Address							
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City	40789 Monheim	State		Zip		Country	Germany	Applicant Authority
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Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor

Given Name	Amergio	Middle Initial		Family Name	PASTURA	Suffix e.g. Jr.	
------------	---------	----------------	--	-------------	---------	-----------------	--

Inventor's Signature					Date		
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Residence: City	Witten	State		Country	Germany	Citizenship	Germany
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Post Office Address	Sauerbruchstr. 3a						
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Post Office Address							
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City	58453 Witten	State		Zip		Country	Germany	Applicant Authority
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Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor

Given Name	Michael	Middle Initial		Family Name	MEINDERS	Suffix e.g. Jr.	
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Inventor's Signature					Date		
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Residence: City	Krefeld	State		Country	Germany	Citizenship	Germany
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Post Office Address	Am Eickerhof 11						
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Post Office Address							
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City	47800 Krefeld	State		Zip		Country	Germany	Applicant Authority
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Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor

Given Name	Peter	Middle Initial		Family Name	WUELKNITZ	Suffix e.g. Jr.	
------------	-------	----------------	--	-------------	-----------	-----------------	--

Inventor's Signature					Date		
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Residence: City	Leichlingen	State		Country	Germany	Citizenship	Germany
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Post Office Address	Im Erlengrund 9						
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Post Office Address							
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City	42799 Leichlingen	State		Zip		Country	Germany	Applicant Authority
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		Group Art Unit	
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the specification of which

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<input type="checkbox"/>	Firm Name _____	Customer Number _____	
	OR		
<input checked="" type="checkbox"/>	List Attorney(s) and/or agent(s) name and registration number below:		
	Name _____	Registration Number _____	Name _____
	Wayne C. Jaeschke Kimberly R. Hild	21,062 39,224	Glenn E. J. Murphy Stephen D. Harper
			33,539 33,243

Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to:	<input checked="" type="checkbox"/> Customer Number or label	00423	OR	<input type="checkbox"/> Fill in correspondence address below
Name	Glenn E. J. Murphy			
Address	Henkel Corporation - Patent Department			
Address	2500 Renaissance Boulevard, Suite 200			
City	Gulph Mills	State	PA	
Country	USA	Telephone	610-278-4926	
		Fax	610-278-6548	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this					
Given Name	Christian	Middle Initial	Family Name	KROPP	Suffix e.g. Jr.		
Inventor's Signature				Date			
Residence: City	Duesseldorf	State		Country	Germany	Citizenship	Germany
Post Office Address		Caecilienstrasse 4					
Post Office Address							
City	40697 Duesseldorf	State	Zip	Country	Germany	Applicant Authority	
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto							

**DECLARATION****ADDITIONAL INVENTOR(S)**  
Supplemental Sheet

Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor

Given Name	Ulrike	Middle Initial		Family Name	BRUENINGHAUS	Suffix e.g. Jr.	
------------	--------	----------------	--	-------------	--------------	-----------------	--

Inventor's Signature					Date		
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Residence: City	Monheim	State		Country	Germany	Citizenship	Germany
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Post Office Address	An der Dorfstr. 6						
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Post Office Address							
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Given Name	Amergio	Middle Initial		Family Name	PASTURA	Suffix e.g. Jr.	
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Inventor's Signature					Date		
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Given Name	Michael	Middle Initial		Family Name	MEINDERS	Suffix e.g. Jr.	
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Inventor's Signature					Date		
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Inventor's Signature					Date		
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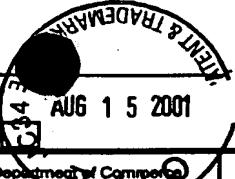
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**DECLARATION****ADDITIONAL INVENTOR(S)**  
Supplemental SheetName of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor

Given Name	Rolf	Middle Initial		Family Name	HEMPELMANN	Suffix e.g. Jr.		
Inventor's Signature					Date			
Residence: City	St. Ingbert	State		Country	Germany	Citizenship	Germany	
Post Office Address	St. Herblainer Str. 11							
Post Office Address								
City	66386 St. Ingbert	State		Zip		Country	Germany	Applicant Authority

Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor

Given Name	Marcel	Middle Initial		Family Name	ROTH	Suffix e.g. Jr.		
Inventor's Signature					Date			
Residence: City	Duesseldorf	State		Country	Germany	Citizenship	Germany	
Post Office Address	Weststrasse 17							
Post Office Address								
City	40597 Duesseldorf	State		Zip		Country	Germany	Applicant Authority

Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor

Given Name		Middle Initial		Family Name				Suffix e.g. Jr.	
Inventor's Signature					Date				
Residence: City		State		Country			Citizenship		
Post Office Address									
Post Office Address									
City		State		Zip		Country			Applicant Authority

Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor

Given Name		Middle Initial		Family Name				Suffix e.g. Jr.	
Inventor's Signature					Date				
Residence: City		State		Country			Citizenship		
Post Office Address									
Post Office Address									
City		State		Zip		Country			Applicant Authority

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Name Glenn E. J. Murphy  
 Address Henkel Corporation - Patent Department  
 Address 2500 Renaissance Boulevard, Suite 200  
 City Gulph Mills State PA ZIP 19406  
 Country USA Telephone 610-278-4926 Fax 610-278-6548

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

100  
 Name of Sole or First Inventor:  A petition has been filed for this  
 Given Name Christian Middle Initial D Family Name KROPF Suffix e.g. Jr. \_\_\_\_\_  
 Inventor's Signature Christian Kropp Date August 1, 2001  
 Residence: Duesseldorf State \_\_\_\_\_ Country Germany Citizenship Germany

Post Office Address Caeciliengasse 4  
 Post Office Address \_\_\_\_\_  
 City 40597 Duesseldorf State \_\_\_\_\_ Zip \_\_\_\_\_ Country Germany Applicant Authority \_\_\_\_\_

Additional inventors are being named on supplemental sheet(s) attached hereto

**DECLARATION****ADDITIONAL INVENTOR(S)**  
Supplemental Sheet

Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor

Given Name	Ulrik	Middle Initial		Family Name	BRUENINGHAUS	Suffix e.g. Jr.	
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Inventor's Signature	<i>Ulrike Brüninghaus</i>				Date	August 1, 2001	
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Residence: City	Monheim	DEX	State		Country	Germany	Citizenship	Germany
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Post Office Address	An der Dorfstr. 6							
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Post Office Address								
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City	40789 Monheim	State		Zip		Country	Germany	Applicant Authority
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Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor

Given Name	Amerigo	25.7.01	Middle Initial		Family Name	PASTURA	Suffix e.g. Jr.	
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Inventor's Signature	<i>Amerigo Pastura</i>				Date	August 1, 2001	
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Residence: City	Witten	DEX	State		Country	Germany	Citizenship	Germany
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Post Office Address	Sauerbruchstr. 3a							
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Post Office Address								
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City	58453 Witten	State		Zip		Country	Germany	Applicant Authority
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Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor

Given Name	Michael	Middle Initial		Family Name	MEINDERS	Suffix e.g. Jr.	
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Inventor's Signature	<i>Michael Meinders</i>				Date	August 1, 2001	
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Residence: City	Krefeld	DEX	State		Country	Germany	Citizenship	Germany
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Post Office Address	Am Eickerhof 11							
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Post Office Address								
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City	47800 Krefeld	State		Zip		Country	Germany	Applicant Authority
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Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor

Given Name	Peter	Middle Initial		Family Name	WUELKNITZ	Suffix e.g. Jr.	
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Inventor's Signature	<i>Peter Wuelknitz</i>				Date	August 1, 2001	
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Residence: City	Leichlingen	DEX	State		Country	Germany	Citizenship	Germany
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Post Office Address	Im Erlengrund 9							
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Post Office Address								
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City	42799 Leichlingen	State		Zip		Country	Germany	Applicant Authority
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Additional inventors are being named on supplemental sheet(s) attached hereto

## **DECLARATION**

**ADDITIONAL INVENTOR(S)**  
**Supplemental Sheet**

**Name of Additional Joint Inventor, if any:**

A petition has been filed for this unsigned inventor

**DECLARATION****ADDITIONAL INVENTOR(S)**  
Supplemental Sheet

Name of Additional Joint Inventor, if any:

 A petition has been filed for this unsigned inventor

Given Name	Rolf	Middle Initial		Family Name	HEMPELMANN	Suffix e.g. Jr.	
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Inventor's Signature					Date		
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Residence: City	St. Ingbert	State		Country	Germany	Citizenship	Germany
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Post Office Address	St. Herblainer Str. 11						
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Post Office Address							
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City	66386 St. Ingbert	State		Zip		Country	Germany	Applicant Authority
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Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor

Given Name	Marcel	Middle Initial		Family Name	ROTH	Suffix e.g. Jr.	
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Inventor's Signature	<i>Marcel R</i>				Date	August 1, 2001	
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Residence: City	Duesseldorf	State		Country	Germany	Citizenship	Germany
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Post Office Address	Weststrasse 17						
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Post Office Address							
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City	40597 Duesseldorf	State		Zip		Country	Germany	Applicant Authority
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Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor

Given Name		Middle Initial		Family Name				Suffix e.g. Jr.
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Inventor's Signature					Date		
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Residence: City		State		Country		Citizenship	
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Post Office Address							
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Post Office Address							
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City		State		Zip		Country		Applicant Authority
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Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor

Given Name		Middle Initial		Family Name				Suffix e.g. Jr.
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Inventor's Signature					Date		
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Residence: City		State		Country		Citizenship	
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Post Office Address							
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Post Office Address							
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City		State		Zip		Country		Applicant Authority
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Additional inventors are being named on supplemental sheet(s) attached hereto